

# ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA

} ss

County of Maricopa

CERTIFICATE NO. - 119 -

DOCKET NO. EMS 3461

THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, under the authority of A.R.S. § 36-2232 et seq and Pursuant to Department of Health Services rules, that public necessity requires the operation of

## WHETSTONE FIRE DISTRICT dba WHETSTONE FIRE DISTRICT AMBULANCE SERVICE

as a ground ALS and BLS ambulance service in the State of Arizona for the transportation of individuals who are sick, injured, wounded or otherwise incapacitated or helpless within the following service area, with the following central operations station and response times:

### 1. Service Area:

*Starting at milepost 45.3 on State Highway 82, which is at the Cochise-Santa Cruz County line, proceed due North to the Southwest corner of Section 31, Township 19 South, Range 19 East; proceed east through the Southeast corner of Section 36, Township 19 South, Range 20 East, to the San Pedro River; proceed along the West bank of the River, South to its intersection with the Babocomari River; proceed along the North Bank of the Babocomari River, generally South and West, to a point due South of milepost 45.3 on the Cochise-Santa Cruz County line; and proceed due North to the point of beginning.*

### 2. Central Operating Station: *Whetstone, Arizona.*

### 3. Response Times:

- a. *Ten (10) minutes on ninety (90) percent of all ambulance calls.*
- b. *Fifteen (15) minutes on ninety-five (95) percent of all ambulance calls.*
- c. *Thirty (30) minutes on one hundred (100) percent of all ambulance calls.*

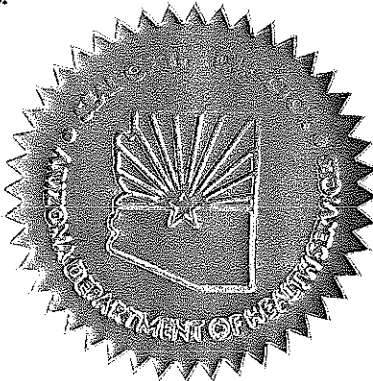
Now, therefore, by virtue of the authority vested in the Arizona department of Health Services, under the constitution and laws of the State of Arizona, does hereby grant this

## RENEWAL

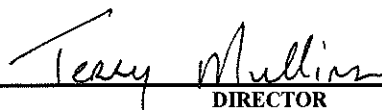
## CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending January 31, 2013 unless for cause sooner amended, suspended, revoked or terminated subject to the decisions and orders, and rules of the Department.

PROVIDED, that this certificate shall not be assigned nor transferred unless authorized by the Arizona Department of Health Services.



BY THE ORDER OF THE ARIZONA DEPARTMENT OF HEALTH SERVICES, IN WITNESS WHEREOF, I WILL HUMBLE the interim Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services to be affixed at Phoenix, Arizona on 1-14-10

  
DIRECTOR